Public NoticeComprehensive and Supports Waivers



October 10, 2021

CHANGES TO STATEWIDE METHODS AND STANDARDS FOR SETTING PROVIDER PAYMENT RATES FOR THE COMPREHENSIVE AND SUPPORTS WAIVERS

This notice of changes in statewide methods and standards for setting payment rates is provided in accordance with the provisions of 42 CFR § 447.205. The Wyoming Department of Health, Division of Healthcare Financing (Division) proposes and seeks public comment on the following changes:

Implementation of Supports and Comprehensive Waiver provider payment rate methodology as established in the Guidehouse report entitled Comprehensive and Supports Waivers SFY2023 Provider Rate Study.

In 2008, the Department of Health was required by state statute (W.S. 42-4-120 (g)) to establish a cost-informed reimbursement system to pay providers of services and supplies under home and community based waiver programs for persons with developmental disabilities or acquired brain injury. This state statute also required that rates be rebased at least once every four (4) years, but not more than once in any two (2) year period.

The proposed rate methodology uses an independent rate build-up approach based on cost and wage data from providers and other state and national data sources. The independent rate build-up methodology comprises direct care and indirect care components and uses assumptions about types of employees; wage rates; benefits; program support and administration costs; supervisor span of control; staffing patterns; and direct care work productivity factors. The anticipated increase to the annual aggregate expenditures is approximately \$9,458,515.

The Centers for Medicare and Medicaid Services (CMS) approved applications to amend the rate determination methods described in Appendix I-2 of the Supports and Comprehensive Waivers. The Comprehensive and Supports Waivers SFY 2023 Provider Rate Study report is available under the Statistics and Reports section of this webpage.

Public comment on these proposed changes closed on Tuesday, November 9, 2021.

Amendments have been approved by CMS.

